Campaign Statement – Short Form		Date of election if applicable:		Date Stamp CALIFORNIA FORM FORM For Official Use Only
		(Month, Day, Year)	Amendment (Explain Below)	- CAMPAIGN FINANCE
1.	Statement Covers Calendar Year 20 21	• }		THINGE
2.	Officeholder or Candidate Information NAME OF OFFICEHOLDER OR CANDIDATE GORDON JOHN SON STREET ADDRESS		JURISDICTION (LOCATION)	BOARD OF DIRECTORS, DIVISION 3. RRIGATION DISTRICT DISTRICT NUMBER (IF APPLICABLE)
 4.	Committee Information List all committees of which you have knowledge the	OPTIONAL: FAX / E-MAIL ADDRESS	sive contributions or to make expend	litures on hehalf of your candidacy
	COMMITTEE NAME AND I.D. NUMBER	lat are primarily formed to rece	COMMITTEE ADDRESS	NAME OF TREASURER
	NONE		· · · · · · · · · · · · · · · · · · ·	
	NONE			